

HS-19.16, "Mental Health Services - Medication Assisted Treatment Program Delivery Protocol"

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SCDC POLICY

NUMBER: HS-19.16

TITLE: MENTAL HEALTH SERVICES - MEDICATION ASSISTED TREATMENT PROGRAM
DELIVERY PROTOCOL

ISSUE DATE: February 20, 2018

RESPONSIBLE AUTHORITY: DIVISION OF MENTAL HEALTH SERVICES

OPERATIONS MANUAL: HEALTH SERVICES

SUPERSEDES: NEW POLICY

RELEVANT SCDC FORMS/SUPPLIES: 19-11, M-201, M-202, M-203, M-204, M-205

ACA/CAC STANDARDS: 4-ACRS-4C-06, 4-ACRS-5A-08, 4-ACRS-5A-12, 4-ACRS-7D-08, 4-4099, 4-4102, 4-4347, 4-4350, 4-4361, 4-4363-1, 4-4377, 4-4378, 4-4413, 4-4437, 4-4438, 4-4439, 4-4440, 4-4441

STATE/FEDERAL STATUTES: Health Insurance Portability and Accountability Act of 1996 (HIPPA)

PURPOSE: The purpose is: (1) to provide Medication Assisted Treatment (MAT) education to an offender prior to his/her release in an effort to reduce recidivism, and to increase treatment retention and improved outcomes; (2) to empower offenders with evidence-based recovery tools necessary to recover from alcohol and opioid Substance Use Disorders (SUD) with the use of Naltrexone and Vivitrol; (3) to assist offenders who have opioid and alcohol use disorders achieve long-term abstinence and recovery by managing cravings and blocking the effects of ingested opioids and alcohol; and (4) to improve outcomes for offenders enrolled in the MAT Program, facilitate the coordination of services, and increase communication and collaboration with community stakeholders.

POLICY STATEMENT: It is the policy of the South Carolina Department of Corrections (SCDC) to employ various Medication Assisted Therapies as an adjunct to social, behavioral, and supportive therapies and services, to assist offenders to achieve a successful integration into society while effectively managing their lifelong recovery.

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SPECIFIC PROCEDURES:

1. OVERVIEW:

1.1 The connection between drug abuse and crime is well known. One-half to two-thirds of inmates in jails and in state and Federal prisons meet standard diagnostic criteria (DSM-5) for alcohol/drug substance use disorders. Research indicates that when treating substance use disorders, a combination of medication and behavioral therapies is most successful. MAT is clinically driven with a focus on individualized patient care. Medication Assisted Treatment or Therapy is the use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders, usually related to opioid/heroin and alcohol.

2. CORE FUNDAMENTALS OF PROGRAM DELIVERABLES:

2.1 Screening/Orientation: The administrative and initial screening procedures determine an offender's eligibility and readiness for the Medication Assisted Treatment Program (MAT). All offenders may receive orientation at initial Reception and Evaluation Center intake, placement at identified MAT Program institutions, and/or upon request of MAT Program services. Offenders will receive a description of the following:

- general nature and goals of the program;
- rules governing offender program expectations;
- Notice of infractions that can lead to termination from the program services; and
- Naltrexone and Vivitrol medication education.

2.2 Screening and orientation services will initially be provided at the following locations (although they may be expanded in the future): Kirkland C.I., Camille Graham C.I., Turbeville C.I., Manning C.I., and/or within the community. Offenders who are requesting MAT Program admission will need to forward SCDC Form 19-11, "Request to Staff Member," to the Division of Behavioral/Mental Health and Substance Abuse Services, Division Director or designee. SCDC staff may submit SCDC Form M-203, "MAT Program,

Program Referral Form," when referring an offender to the program. Offenders requesting admission will receive SCDC Form M-201, "MAT Program, Letter to Offender," notifying them that the request has been submitted to the Division Director.

2.3 Admission and Criteria: Admission is initiated by the offender requesting enrollment in the MAT Program by submitting SCDC Form 19-11, "Request to Staff Member," to either Division of Behavioral/Mental Health and Substance Abuse Services, Division Director or designee, an Addiction Treatment Program's Manager, Peer Support Specialist, or assigned Youthful Offender Intensive Supervision Officer (ISO). The admission process is designed to assess the offender's appropriateness for programming by reviewing the offender's problems, needs, Substance Use Disorders (SUD) history, medical records, weaknesses, strengths, and commitment to behavioral changes. Offenders will be informed of all aspects of the multifaceted MAT process and its information requirements, including: (1) the consent to treatment; (2) program record keeping and confidentiality requirements (e.g., who has access to records and when, who can divulge information without patient consent); and (3) program rules, including patient rights, grievance procedures, and circumstances under which a patient may be discharged involuntarily. Service deliverables of the MAT Program apply universally for all participants while incarcerated; however, community supervision timeframes vary based on participant request for services. All MAT Programming is voluntary. The assigned MAT Counselor for offenders who are approved to participate in the program should submit SCDC Form M-205, "MAT Program, Medical Referral," to the SCDC medical staff for further medical assessment to determine if the offender will be admitted into the MAT Program. In addition to SCDC staff, the assigned MAT Counselor can be a Peer Support Specialist through a collaborative arrangement with the South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS).

2.3.1 Criteria: An Addiction Treatment Program staff person, Peer Support Specialist, or an ISO will make arrangements to meet with the offender to determine his/her eligibility which includes the following:

- History of opioid use;
- The offender is required to agree and sign SCDC Form 202, "MAT Program, Vivitrol (Naltrexone extended release injection) Consent Form;"
- Agrees to engage with an identified community provider post release for follow-up counseling and support with follow-up injections;
- Agrees to sign a Department of Alcohol and Other Drug Abuse Services (DAODAS) Form, "Consent for the Release of Confidential Information," to promote continuity of care; and
- Able to follow up with outside provider.
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2.3.2 Exclusion Criteria:

- Pre-trial status;
- Liver enzymes 3x normal (e.g., >120: to be determined by medical staff); or

- Refuses to sign SCDC Form M-202, "MAT Program, Vivitrol (Naltrexone extended release injection) Consent Form," and/or the Department of Alcohol and Other Drug Abuse Services (DAODAS) Form, "Consent for the Release of Confidential Information."

2.4 Post Release Referral: Offenders who are not enrolled in the MAT Program prior to release/max-out may still be referred to the Program. These referrals may be made by a Youthful Offender Intensive Supervision Officer (ISO). The ISO will need to request offender admission approval through the Division of Behavioral/Mental Health and Substance Abuse Services, Division Director or designee, if MAT Vivitrol services will not be sponsored through the Young Offender Parole and Reentry Services (YOPRS). If the offender admission is approved, the ISO may contact the nearest DAODAS community treatment provider network providing MAT services. The standard Agency admission requirements should be followed to ensure offender placement. The DAODAS agency offices in counties providing medication assisted treatment are: Charleston, Orangeburg, Bamberg, Calhoun, Pickens, Greenville, Marion, Marlboro, Dillon, Horry, Columbia, Lexington, Spartanburg, Colleton, and York counties.

2.5 Education: Candidates for the MAT Program will receive individual support sessions. The first session will focus on an assessment of motivational state, commitment to treatment, and MAT Program expectations of participation, and consent. If the offender signs SCDC Form M-202, "MAT Program, Vivitrol (Naltrexone extended release injection) Consent Form," and the Department of Alcohol and Other Drug Abuse Services (DAODAS) Form, "Consent for the Release of Confidential Information," then the Addiction Treatment Program staff, Peer Support Specialist, or an ISO officer will forward SCDC Form M-205, "MAT Program, Medical Referral," to the SCDC medical staff for further medical assessment to determine if the offender will be admitted into the MAT Program. If medical clearance is received, the assigned MAT Counselor will schedule the required individual support follow-up sessions. If medical clearance is not received, the offender will be notified in person by the assigned MAT Counselor. The 30-minute individual support sessions will focus on three (3) main themes and be conducted by the Peer Support Specialist/MAT Counselor:

- An assessment of and commitment to treatment;
 - Psychological education appropriate to the inmate; readiness for change; and
 - Supportive and reinforcing counseling intended to strengthen the offender's commitment to recovery.
- 2.5.1 All participants will receive an individual support session within the two (2) week timeframe that the offender receives his/her initial Naltrexone oral dosage. In addition to an individual support session within a week of receiving the first Vivitrol injection, offenders will receive education on the importance of program compliance and the risk factors associated with continued alcohol and drug use while receiving Medication Assisted Treatment. This will include how Naltrexone works differently than methadone and buprenorphine in the treatment of opioid substance use, along with the information discussing if a person using Naltrexone relapses and uses the abused drug. Participants will be made aware that Naltrexone blocks the euphoric and sedative effects of the abused drug and prevents feelings of euphoria.

2.5.2 Upon completion of the assigned individual support sessions, a Case Management Treatment Team review will be facilitated by the MAT Program assigned Counselor, offender ISO, and any additional staff

pertinent to ensure a cohesive transfer from pre-release services to post-release community services. The MAT Counselor will begin individual support sessions ninety (90) days prior to the participant's release from SCDC.

3. METHODOLOGY:

3.1 Pre-release delivery of both Naltrexone and Vivitrol will be administered by the South Carolina Department of Corrections, Division of Health Services, medical personnel. The MAT Counselor will submit SCDC Form M-205, "MAT Program, Medical Referral," to medical personnel within two (2) weeks of the initial individual support session. Upon receipt of a medical referral, medical personnel will meet with the offender. The assigned medical staff and the offender will discuss whether Vivitrol treatment is appropriate from a medical perspective. If it is determined that the offender is appropriate for participation, the medical staff will begin to make arrangements for medical clearance which will consist of overall health and liver function tests (blood lab).

3.2 If the lab work is within normal range and the offender is deemed medically appropriate for participation in the program, a Naltrexone tolerance trial will be arranged two (2) weeks prior to the first injection of Vivitrol. The medical staff will administer a urine drug screening to ensure that offenders are drug free eleven to fourteen (11-14) days before administration of the drug.

3.3 Naltrexone Tolerance Trial: Offenders participating in the MAT Program will be prescribed Naltrexone 50 mg. daily for two (2) weeks, prior to receiving the Vivitrol injection by assigned medical staff person or designee. The purpose of this trial is to assess for any adverse effects of the medication.

3.4 Initiation of Vivitrol: Offenders participating in the MAT Program will receive the first injection of Vivitrol approximately fourteen (14) days prior to release.

3.5 Doses of the medication will be carefully recorded in a log book because each dosing kit contains a safety syringe hypodermic needle.

3.6 The medical staff working with the offender must complete SCDC Form M-204, "Letter for Verification Participation." This letter must be given to the offender's MAT Counselor/Discharge Planner and Intensive Supervision Officer. Trained medical/nursing staff members at SCDC will administer the medication.

4. DISCHARGE PLANNING: The MAT Counselor will meet with offenders who have been approved to participate in the MAT Program a minimum of ninety (90) days pre-release.

4.1 Assigned MAT Program Counselor must immediately determine health coverage status. Offenders who had insurance while in the community may still have coverage; however, it will have been suspended and will require reactivation upon release. Offenders who do not have insurance must complete an application as soon as possible to make certain that they will have coverage to support the ongoing injections in the

community if an individual source of insurance is an option. Offenders will be informed that, if insurance is not an option, financial services will be available through YOPRS and/or SC DAODAS to continue Vivitrol injections. Duration of post release services will be individualized to meet the needs of each participating offender.

4.2 The MAT Program Counselor will determine where the offender will be living in the community, and in collaboration with the participant will decide which community-based program will best accommodate the offender's needs. The SC DAODAS community providers are the only providers that have a Memorandum of Understanding (MOU) with SCDC and are, therefore, the only programs that offenders should be referred to for MAT post release program services.

4.3 Once a DAODAS community provider has been selected, the MAT Counselor will ask the offender to complete a Department of Alcohol and Other Drug Abuse Services (DAODAS) Form, "Consent for the Release of Confidential Information," The MAT Counselor will contact the community provider to make a referral and to arrange a phone and/or video conference call for initial introductions. The focus of this call is to initiate the engagement process between the offender and the community treatment program staff. Initial pre-admission paperwork may be completed at this time. If the offender has an assigned ISO, the ISO will also be invited to the meeting in an effort to ensure continuity of care services.

4.4 Post Release Treatment Providers with Memorandums of Understanding: SC DAODAS community providers identified through the collaborative arrangement have agreed to collaborate with SCDC on the MAT Vivitrol Program. The following discharge planning package information will be forwarded to the community provider enhancing continuity of care: medical evaluation labs and forms, consent forms, start dates of oral Naltrexone and any side effects, date of first injection, demographic information, contact information, and what corrections facility the offender is released from. The shared goal is to facilitate transition into substance use disorder treatment in the community.

5. OUTCOME MEASURES: Pre-release Program Activity Codes will be created to provide data indicating services received to each participant in the effort to measure program effectiveness. The following codes will be utilized:

- Code 978 - Admission Medication Assisted Treatment Program (MAT Program);
- Code 979 - MAT Program Post Release 90 Day;
- Code 980 - MAT Program Post Release 180 Day; and
- Code 981 - MAT Program Post Release Placement.

5.1 Discharge from Pre-Release Program:

5.1.1 The discharge date is the last scheduled day that the offender is assigned to the MAT Program. The community provider will enter the discharge code in the AMR Program service screen indicating the participant has been discharged. If the offender is discharged from the program due to any of the following reasons, the discharge code can be entered at that time: 1) max-out prior to completion of services; 2) early release; 3) medical reasons; or 4) behavioral disciplinary. 5.1.2 The discharge code should be entered no

later than five (5) business days from the offender's discharge date.

5.1.3 The following codes should be entered in the AMR Program services screen IF USED:

- Code 978 - Admission Medication Assisted Treatment Program (MAT Program);
- Code 979 - MAT Program Post Release 90 Day;
- Code 980 - MAT Program Post Release 180 Day; and
- Code 981 - MAT Program Post Release Placement.

5.2 The following information will also be tracked by SCDC to monitor program effectiveness:

- The date of oral Naltrexone and date of first injection;
- The number of injections administered for each participant throughout the enrollment of the program;
- Drug screen results for participants;
- Whether an inmate completed the two (2) weeks of oral Naltrexone;
- Recidivism rates for offenders participating in the program; and
- Offenders remaining connected to a community DAODAS provider once enrolled in the program.

6. DEFINITIONS:

Addiction Treatment Program Manager - The Manager of the substance use treatment program providing criminal addictive and substance use education/treatment to the offenders within the South Carolina Department of Corrections.

Intensive Supervision Officer (ISO) - SCDC Division of Young Offender Parole and Reentry Services (YOPRS) employees assigned to provide intensive supervision to the youthful offender population during their incarceration and after their release from SCDC in an effort to support the offender's return to the community.

Medication Assisted Treatment Counselor (MAT Counselor) - The Medication Assisted Treatment Counselor is identified as either the Peer Support Specialist or an Addiction Treatment Program Counselor (ATU Counselor). ATU Counselors work in the Addiction Treatment Program under the supervision of the Addiction Treatment Program Manager.

Medication Assisted Treatment Program - The Substance Abuse and Mental Health Services Administration (SAMHSA) explains, "MAT is the use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders.

Peer Support Specialist - Peer support will be provided by self-identified persons of substance use treatment who can demonstrate their own efforts toward self-directed recovery. By definition, a Peer Support Specialist (PSS) should be a person in recovery from an alcohol or other drug use disorder, with the following experiences and abilities:

- Have the ability to demonstrate recovery expertise, including knowledge of approaches to support others in recovery and dual recovery, as well as the ability to demonstrate his or her own efforts at self directed recovery; and
- Two years of active participation in a local or national self-help group or recovery movement that is evidenced by previous volunteer or work experience.

In addition to being well established in his or her own recovery, the PSS should be resilient. He/she should possess the personal and community qualities that enable him/her to rebound from adversity, trauma, tragedy, threats, or other stressors and to go on with life with a sense of mastery, competence and hope. The PSS is a staff member hired by the South Carolina Department of Alcohol and Other Drug Services who will work at the South Carolina Department of Corrections with inmates transitioning back to the community.

SIGNATURE ON FILE

—
s/Bryan P. Stirling, Director

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Date of Signature

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